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PTO/SB/81 (01-09)

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POWER OF ATTORNEY OR **REVOCATION OF POWER OF ATTORNEY** WITH A NEW POWER OF ATTORNEY **AND** CHANGE OF CORRESPONDENCE ADDRESS

	Application Number	10/766,670
	Filing Date	27 January 2004
	First Named Inventor	D. Gabriel Frost
	Title	System and Method for Ubiquitous network
	Art Unit	2444
	Examiner Name	CLOUD, JOIYAM
•	Attorney Docket Number	

I hereby revoke all provious powers of atternoy given in the above identified application							
I hereby revoke all previous powers of attorney given in the above-identified application.							
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I am the: Applicant/Inventor. OR Assignee of record of the entire interest. See 37 CFR 3.71.							
Statement under	37 CFR 3.73(b) (Form PTO/SB/96) submitted he			·			
Signature	150 Mil, 160ATURE of Applicant 2010.10.25 11:02:33			23 September 2010			
Name	David D. Miller		Date Telephone	206-517-5520			
Title and Company	n/a		relephone	200-017-0020			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total of forms are submitted.							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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I hereby revoke all previous powers of attorney given in the above-identified application.								
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City	Seattle	State	WA	Zip 98115				
Country	USA		L					
Telephone	208-528-8110	Email	daviddmiller@comcast.net					
I am the: Applicant/Inventor.								
Assignee of reco	ard of the entire interest, See 37 CFR 3.71. : 37 CPR 3.73(b) (Form PTO/SB/96) submitted here:	with or filed (on	·				
	SIGNATURE of Applicant or	Assignee o	f Record					
Signature Aleks Wash		Date 18 October 2010						
Name		Telephone	206-517-5520					
Title and Company / n/a								
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